



<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b> <i>(use as many sheets as necessary)</i>				<b>Application Number</b>		<b>10/585,472</b>	
				<b>Filing Date</b>		<b>July 6, 2006</b>	
				<b>First Named Inventor</b>		<b>Noriaki Onodera</b>	
				<b>Art Unit</b>		<b>To be assigned</b>	
				<b>Examiner Name</b>		<b>To be assigned</b>	
<b>Sheet</b>	<b>1</b>	<b>of</b>	<b>1</b>	<b>Attorney Docket Number</b>		<b>187920/US – 465122-28</b>	
<b>U.S. PATENT DOCUMENTS</b>							
<b>*Examiner Initials</b>	<b>Cite No.</b>	<b>DOCUMENT NUMBER Number - Kind Code (if known)</b>		<b>Publication Date MM-DD-YYYY</b>	<b>Name of Patentee or Applicant of Cited Document</b>		<b>Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear</b>
/D.Y./		US 3,276,924		10-04-1966	Okamoto et al.		
/D.Y./		US 6,224,694		05-01-2001	Prskawetz et al.		
<b>FOREIGN PATENT DOCUMENTS</b>							
<b>*Examiner Initial</b>	<b>Cite No.</b>	<b>FOREIGN PATENT DOCUMENT</b>		<b>Publication Date MM-DD-YYYY</b>	<b>Name of Patentee or Applicant of Cited Document</b>	<b>YES</b>	<b>NO</b>
		<b>Country Code:</b>	<b>Number - Kind Code (if known)</b>				
/D.Y./		RU	2128718	04-10-1999	Aksionernoe Obshchestvo Otkry**	<input checked="" type="checkbox"/>	<input type="checkbox"/>
/D.Y./		RU	2101369	07-18-1995	Foest-Alpine Shinen **	<input type="checkbox"/>	<input checked="" type="checkbox"/>

\*\* References cited in Notice of Allowance issued December 28, 2007, for corresponding Russian Patent Application No. 2006125717

<b>OTHER DOCUMENTS - NON-PATENT LITERATURE DOCUMENTS</b>				
<b>*Examiner Initials</b>	<b>Cite No.</b>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	<b>TRANSLATION</b>	
			<b>YES</b>	<b>NO</b>
/D.Y./		Copy of Notice of Allowance issued December 28, 2007, for corresponding Russian Patent Application No. 2006125717 and English – language translation thereof	<input checked="" type="checkbox"/>	<input type="checkbox"/>
<b>EXAMINER SIGNATURE</b> /Deborah Yee/			<b>DATE CONSIDERED</b> 01/07/2009	
<b>*EXAMINER:</b> Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.				

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